

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | JL       |        | 2/14/00  |
| O.I.P.E. CLASSIFIER       |          | 10     | 8-17-00  |
| FORMALITY REVIEW          | DM       | 72223  | 9/21/00  |
| RESPONSE FORMALITY REVIEW |          |        | 11/30/00 |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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